

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Matham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **M71970 (1)**
1. Corporation Name
CAMVEST, INC.



Principal Place of Business
**3100 UNIVERSITY BLVD. S.
SUITE 200
JACKSONVILLE FL 32216
US**

Mailing Address
**3100 UNIVERSITY BLVD. S.
SUITE 200
JACKSONVILLE FL 32216
US**

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

23 City & State

27 City & State

24 Zip

25 Country

29 Zip

30 Country

9. Name and Address of Current Registered Agent

**MONTALVO, DEBBIE H.
3100 UNIVERSITY BLVD S
SUITE 200
JACKSONVILLE FL 32216**

3. Date Incorporated or Qualified
03/07/1988

3a. Date of Last Report
05/01/1995

4. FEI Number
59-2877519

Applied For
Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution ☐

**\$5.00 May Be
Added to Fees**

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☒ No

10. Name and Address of New Registered Agent

81 Name **Geraldine G. Brown**
82 Street Address (P.O. Box Number is Not Acceptable)
3100 University Blvd. S.
83 **Suite 200**
84 City **Jacksonville**

85 Zip Code
FL 32216

11. Pursuant to the provisions of Sections 607.0542 and 607.1544, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE *Geraldine G. Brown*

Geraldine G. Brown 4/18/96

12. OFFICERS AND DIRECTORS

TITLE	CPTD	☐ DELETE
NAME	CLARKSON, CHARLES A.	
STREET ADDRESS	CLARKSON, CHARLES A.	
CITY-STATE-ZIP	JACKSONVILLE FL	
TITLE	VDAT	☐ DELETE
NAME	CLARKSON, ROBERT W.	
STREET ADDRESS	3100 UNIVERSITY BLVD. S, SUITE 200	
CITY-STATE-ZIP	JACKSONVILLE FL	
TITLE	VSD	☐ DELETE
NAME	CLARKSON, PATRICIA H.	
STREET ADDRESS	3100 UNIVERSITY BLVD. S, SUITE 200	
CITY-STATE-ZIP	JACKSONVILLE FL	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	☐ Change ☐ Addition
1. TITLE	
2. NAME	
3. STREET ADDRESS	
4. CITY-STATE-ZIP	
5. TITLE	
6. NAME	
7. STREET ADDRESS	
8. CITY-STATE-ZIP	
9. TITLE	
10. NAME	
11. STREET ADDRESS	
12. CITY-STATE-ZIP	
13. TITLE	
14. NAME	
15. STREET ADDRESS	
16. CITY-STATE-ZIP	
17. TITLE	
18. NAME	
19. STREET ADDRESS	
20. CITY-STATE-ZIP	

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*****200.00**

4.23.96

SIGNATURE:

Robert W. Clarkson Robert W. Clarkson 4/18/96 904-359-0045

CR2E034 (12/95)